Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION DECLARATION BY THE INVENTOR	Docket Number (Optional) 30545.11						
I hereby declare that: Each inventor's residence, mailing address and citizenship are stated below next to their name. I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in patent number 6,196,311 granted March 6, 2001 and for which a reissue patent is sought on the invention entitledUNIVERSAL CEMENTING PLUG							
the specification of which	,						
is attached hereto.							
x was filed on October 3, 2001 as reissue application number	per09/970,432						
and was amended on							
(If applicable)							
I have reviewed and understand the contents of the above-identified specifical amendment referred to above. I acknowledge the duty to disclose information which is material to patentability.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), of equivalent) listing the foreign applications.	or 365(b). Attached is form PTO/SB/02B (or						
I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)							
by reason of a defective specification or drawing.							
by reason of the patentee claiming more or less than he had the right to claim in the patent.							
by reason of other errors.	•						
At least one error upon which reissue is based is described below. If the reiss reissue, such must be stated with an explanation as to the nature of the broad							
The Patentee erred by not presenting claims during the prosecution of the paset forth in the claims being presented up to and including the filing of this dedeceptive intention on the part of the applicant. One error is that claims direct casing and a method for cementing a casing were not submitted. Another enthat includes a body member defining a central opening through the plug and for engaging an inner surface of the casing were not submitted. Yet another patent, namely, claims 1, 8, 11, 19 and 31, did not require that the claimed cextending from a jacket disposed on or around a body member. Thus, the paor less than what the patentee had a right to claim.	claration, which error occurred without any sted to a method for wiping the inner surface of a ror is that claims directed to a cementing plug a plurality of wiper cups extending from the plug error is that certain independent claims in the ementing plug includes a plurality of wiper cups						

[Page 1 of 2]
This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/51 (06-07)

Approved for use through 06/30/2007. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

			Docket Number (Optional)					
(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2 			30545.11					
All errors corrected in t	this reissue application arose withou	ut any decepti	ve intentic	on on the	e part of the	applic	cant.	
Note: To appoint a power of attorney, use form PTO/SB/81.								
Correspondence Address: Direct all communications about the application to:								
·	s associated with Customer Number:]
OR			276	03 				
Firm or Individual Name								
Address			·············					
								
City		State				Zip		
Country								
Telephone			Email	÷	-			
÷	W	ARNING:		L		0		
Petitioner/applicant is	cautioned to avoid submitting pers	onal informati	on in doc	uments	filed in a pa	tent a	application t	hat may
contribute to identity t	heft. Personal information such	as social sec	urity numl	bers, ba	ank account	num	bers, or cre	edit card
	check or credit card authorization for a petition or an application. If this							
	s/applicants should consider redact							
them to the USPTO.	Petitioner/applicant is advised that	at the record	of a pater	nt applic	cation is ava	ailable	to the pub	olic after
	cation (unless a non-publication red							
or issuance of a pater	nt. Furthermore, the record from a ced in a published application or	an abandoned ' an issued r	application	on may e 37 C	also be ava	Chec	to the pub ks and cre	dit card
	O-2038 submitted for payment pu							
publicly available.								
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information								
and belief are believe	ed to be true; and further that the	nese stateme	nts were	made v	vith the kno	wledg	ge that will	ful false
statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful								
false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.								
Full name of sole or first inventor (given name, family name)								
Harold O. Treece		I Dete			·····			
Inventor's signature Date 8-7-08								
Posidoneo								
Duncan, OK			US	; 				
Mailing Address								
213 Ridgecrest Drive, Duncan, OK 73533								
Full name of second joint inventor (given name, family name)								
Inventor's signature	A SAMILANDA AND A SAMILANDA AN	Date						
Residence		Citizen	ship			10.0	-	
Mailing Address								
Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02LR attached hereto.								